Change in Company's premium or rate level produced by rate revision effective 03/18/10 .

(1)	(2) Annual Premium	(3)
Coverage	Volume (Illinois)*	Percent Change (+ or -)**
 Automobile Liability Private Passenger Commercial 	11560811	.5 1.3
 Automobile Physical Damage Private Passenger Commercial 	8958698	1.6
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: NO	territory (territorio	es)or certain classes?

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing, Allstate will

With this filing, Allstate will be revising the rates for Bodily Injury, Property Damage, Medical, Collision, and Comprehensive coverages for Allstate Fire and Casualty Insurance Company in Illinois. We are introducing new deductible options and the FullPay Discount and updating Bodily Injury Increased Limits Factors, Driver Class Factors, and Rate Adjustment Factors resulting in an overall premium level change of 1.1% for this filing. In addition, RP-2A-2 and RP-3B have been revised for clarification purposes.

We are targeting an implementation date of February 15th, 2010, for all business effective on or after March 18th, 2010.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Allstate Fire and Casualty Insurance Company

SUMMARY SHEET

Change in Company's	premium or	rate level	produced l	by rate
revision effective	03-18-10			•

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	106844724	1.3
2. Automobile Physical Damage Private Passenger Commercial	169368689	1.5
3. Liability Other Than Auto		
4. Burglary and Theft 5. Glass		
6. Fidelity 7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance Does filing only apply to certain If so, specify: NO	territory (territories)	or certain classes?
Brief description of filing. (If organization, specify organization	n): With this filing, we rates for Bodily In Medical, Uninsured In Comprehensive covers Illinois for Allsta The overall premium this filing is 1.2% change will be accombousehold composition discount factors and factors. Please refiling memorandum, information about the second second control of the second co	e are modifying our jury, Property Damage, Motorist, Collision, and ages in the state of te Insurance Company. change associated with. The premium level mplished by revising on, multiple policy d rate adjustment fer to the attached rules and rates for more
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	rel which will	
	Allstate Insurance Name of Comp	
	-	-
-	Paul Calcagno State Fi Official - Ti	

Form (RF-3)	SUMMARY SHEET	
Change in Company's	premium or rate level produce	ed by rate
revision effective	3-18-2010	•
(1)	(2)	
(1)	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
	VOI CARE (III III III)	<u> </u>
 Automobile Liability 		
Private Passenger	97744211	1.2
Commercial		
2. Automobile Physical Dam	age	
Private Passenger	86674973	1.8
Commercial		
3. Liability Other Than Au	to	
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail 15. Other		
Line of Insura	200	
	ertain territory (territories	or certain classes?
If so, specify:	terrain territory (territories	, or corcuin crasses.
II so, specify.		
	g. (If filing follows rates o	f an advisory
organization, specify organ		Allstate is modifying its
		njury, Property Damage,
		Motorist, Collision, and
		rages in the state of
		ate Property and Casualty
		The overall premium
	change associated	with this filing is 1.2%.
		t Factors on RP2A-1 and
		djusted to reach the
	overall 1.2% premi	um impact. Household
	Composition and Mu	ltiple Policy Discount
	factors have also	been revised.
		in implementation date of
	February 15, 2010	
	effective on or an	ter March 18, 2010.
* Adjusted to reflect all	prior rate changes.	
** Change in Company's prem		
result from application		
	Allstate Property & Casual	ty Insurance Company
	Allstate Property & Casual Name of Cor	
		mpany

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>January 25, 2010 NB</u>
March 25, 2010 RN

		<u> </u>			
(1)	(2)	(3)			
Coverage	Annual Premium	Percent			
<u>COVOIAGO</u>	Volume (Illinois)	Change (+ or -)**			
1. Automobile Liability Private	\$996,380 (2009)	Increase (0.11%)			
Passenger Commercial	ψ, , , , , , , , , , , , , , , , , , ,	111010400 (011170)			
2. Automobile Physical Damage	\$311,233 (July 2009)	No change (0.00%)			
Private Passenger Commercial	\$311,233 (July 2007)	110 change (0.0070)			
3. Liability Other Than Auto					
4. Burglary and Theft					
5. Glass					
6. Fidelity					
7. Surety					
8. Boiler and Machinery					
9. Fire					
10. Extended Coverage					
11. Inland Marine					
12. Homeowners					
13. Commercial Multi-Peril					
14. Crop Hail					
15. Other					
Line of Insurance	the state of the s				
Does filing only apply to certain territory (territories) or certain classes? If so, specify:					
Does ming only apply to certain te	intory (territories) or certain clas	ses: 11 so, specify.			
This filing establishes new territories:	316-348 We have added liability an	d physical damage rates to include the			
avmanded territories. The rotes for indi	vidual classes were evaluated individ	ually and then raised lowered or left alone			
based on the specific pricing policies of	f American Access.	1 acorcan			
	GURWA	J pr 01			
Brief description of filing (If filing	follows rates of an advisory orga	nization, specify organization):			
We have used a market based system a	and have reviewed the rates, loss ratio	s, and market coverage of American			
Freedom, American Heartland, American	can Service, Founders, Safeway, Unio	que, United Auto, United Equitable, and			
Universal Metro. The rates for Liabili	ty have been increased slightly and w	rill keep us competitive in the market place.			
The new territory designations were created to allow us to maintain a competitive position within those territories.					
*Adjusted to reflect all prior rate c					
**Change in Company's premium	level which will result from appl	ication of new rates.			

American Access Casualty Company
Name of Company

John T Frankowski – Pricing Analyst Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 25, 2010 NB March 25, 2010 RN

(1)	(2)	(3)
Coverage	Annual Premium	<u>Percent</u>
	Volume (Illinois)	<u>Change (+ or -)**</u>
1. Automobile Liability Private	\$18,956,286 (2009)	Increase (0.11%)
Passenger Commercial		
2. Automobile Physical Damage	\$9,522,005 (2009)	No Change (0.00%)
Private Passenger Commercial	, , ,	<u> </u>
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain ter	rritory (territories) or certain classe	es? If so, specify:

This filing establishes new territories: 316-348. We have added liability and physical damage rates to include the expanded territories The rates for individual classes were evaluated individually and then raised, lowered or left alone based on the specific pricing policies of American Access. Metro area only

Brief description of filing (If filing follows rates of an advisory organization, specify organization): We have used a market based system and have reviewed the rates, loss ratios, and market coverage of American Freedom, American Heartland, American Service, Founders, Safeway, Unique, United Auto, United Equitable, and Universal Metro. The rates for Liability have been increased slightly and will keep us competitive in the market place. The new territory designations were created to allow us to maintain a competitive position within those territories.

American Access Casualty Company Name of Company

John T Frankowski - Pricing Analyst Official - Title

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

FORM (RF-3)

Change in Company's pren Effective April 1, 2010	nium or rate level produced	by rate revision
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	\$158,594,630	+0.04%
2. Automobile Physical Damage Private Passenger Commercial	\$117,569,456	-0.03%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass	4.8794.1077	
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	67.000 F.(1	.0.000/
15. Other Miscellaneous	\$7,992,561	+0.00%
Does filing only apply to certain territors. If so, specify:	ory (territories) or certain cla	sses? No
Brief description of filing. (If filing fol Organization, specify organization): Revised Class and CPG Factors. Territor	Rate and Rule Revision, base ra	
*Adjusted to reflect all prior rate char **Change in Company's premium leve result from application of new rates.	el which will	

AMERICAN FAMILY MUTUAL INS. CO.

Name of Company

Official - Title James P. Meyer, ACP, AIM

Senior Pricing Analyst/Filings

FORM (RF-3)

Change in Company's prereffective April 1, 2010	mium or rate level produced	by rate revision
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private Passenger	\$ 12,898,077	+11.3%
Commercial 2. Automobile Physical Damage Private Passenger Commercial	\$ 6,195,438	+2.2%
 Liability Other Than Auto Burglary and Theft 		
5. Glass 6. Fidelity 7. Surety		
8. Boiler and Machinery9. Fire		
10. Extended Coverage 11. Inland Marine 12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail		
15. Other Misc. Coverages Line of Insurance	\$ 402,622	0.0%
Does filing only apply to certain territors, specify:	ory (territories) or certain cla	sses? No
Brief description of filing. (If filing fol organization, specify organization):	Rate and Rule Revision, base	
Revised Class and CPG Factors. Terr		Cnicago Metro.
*Adjusted to reflect all prior rate char **Change in Company's premium leve		

result from application of new rates.

AMERICAN STANDARD INS. CO. OF WI Name of Company

Jamis P. Weyer

Official - Title JAMES P. MEYER, ACP, AIM Sr. Pricing Analyst/Filings

SUMMARY SHEET

•	Change in Company's premium or rat	e level produced by rate revision effective	June 1, 2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger	\$5,667,797	0.0%
	Commercial		
2.	Automobile Physical Damage		2.22
	Private Passenger	\$3,214,217	0.0%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	*****	
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Daga	Thing only apply to contain torritors (4)	erritories) or certain classes? If so, specify:	
No	ining only apply to certain territory (to	•	
110			
Brief.	description of filing. (If filing follows	s rates of an advisory organization, specify of	organization):
Intro	duction of Good Driving Rewards Pro	ogram, Platinum Choice Auto Plan, Full Gla	uss Comprehensive Deductible
	ons and a new Optional Limit Transpo		
	Optional Dilling Station		
		<u> </u>	

Amica Mutual Insurance Company Name of Company

Roland D. Letourneau Assistant Vice President Official - Title

^{*} Adjusted to reflect all prior rate changes.
* Change in Company's premium level which will result from application of new rates.

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective: March 30, 2010

(1) Coveraș	ge	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Automobile Liability	Motorcycle	[Qtr109-Qtr409 on-level]	2.49/
Private Passenger Commercial	Liability	\$1,880,642	3.4%
Automobile Physical Damage	Motorcycle	[Qtr109-Qtr409 on-level]	
Private Passenger Commercial	Phys. Damage	\$1,579,860	3.5%

- 3. Liability Other Than Auto
- 4. Burglary and Theft
- 5. Glass
- 6. Fidelity
- 7. Surety
- 8. Boiler and Machinery
- 9. Fire10. Extended Coverage
- 11. Inland Marine
- 12. Homeowners
- 13. Commercial Multi-Peril14. Crop Hail
- 15. Other

Line of Insurance

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adjusted base rates, class, CC, vehicle age, preferred rider factor, and symbol relativities.

Adjusted points in Classic Program: Household Claim Score and Household Minor C onviction Score.

Adjusted points in Gold Program: Household A t-Fault Accident Score.

Revised Home O wnership Discount eligibility la nguage.

Multi-Cycle Discount increased to 25%.

Minimum Premium increased to \$95.0 0.

Renewal Rate Cap widened to -10% / +30%.

Dairyland Insurance Company

Name of Company

John Clabots - Actuarial Analyst I

Official - Title

^{*} Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

RECEIVED

Form (RF-3)

SUMMARY SHEET

JAN 1 2 2010

Change in Company's premium or rate level produced by rate revision effective <u>January 1, 2010</u>

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)	Change (+ or -)**
1. Automobile Liability		
Private Passenger	797,349	+5%
Commercial	2,884,489	0%
2. Automobile Physical Damage	2,004,400	
Private Passenger	501,790	+1%
Commercial	416,001	0%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Worker's Compensation		
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, Specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

This is an entire new rating structure for Delphi. All territories and classes have been redefined; surcharges and discounts have be recalculated.

JAN 2 - 2010

* Adjusted to reflect prior rate changes.

** Change in Company's premium level which will result from application of new rates.

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Delphi Casualty Company

Name of Company

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

effective February 3, 2010		(2)
(1)	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -) **
Coverage 1 Automobile Liability Private	Annual Premium Volume (Illinois)	Fercent Change (* 61 -)
Private Passenger	4,088,545	6.10%
Commercial	1,000,010	
2 Automobile Physical Damage		
Private Passenger	2,161,538	8.70%
Commercial	2,101,000	
3 Liability Other Than Auto		
4 Burglary and Theft		
5 Glass		
6 Fidelity		
7 Surety		
8 Boiler and Machinery		
9 Fire		
10 Extended Coverage		
11 Inland Marine		
12 Homeowners		
13 Commercial Multi-Peril		
14 Crop Hall		
15 Other		
Life of Insurance	9	
Does filing only apply to certain territory (to	erritories) or certain	
Classes? If so,		
specify No.		
Brief description of filing. (If filing follows ra	ates of an advisory	
Organization, specify organization):	ates of all advisory	•
We are seeking a new husiness effective	ve date of February 3, 2010 and a renewa	l effective date of March 15, 2010
renewal business. The changes include	le Base Rates and Discount Matrix factor	\$
Tellewal business. The changes more	ic base rates and bloods it many factor	
* Adjusted to reflect all prior rate changes.		
** Change in Company's premium level w	hich will result from application of new	
rates.		
	Financial Indemnity Company	
	Name of 0	, ,
	Rick Miller - Product Manager - Illing	
	Official	- I ITIE

H29219D

SUMMARY SHEET

Change in Company's premiur revision effective <u>July 1,</u>	n or rate level produced 2010	by rate
(1)	(2)	(3) Percent
<u>Coverage</u>	Annual Premium Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage	3035846	-0.2
Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain If so, specify: No.	territory (territories) or	-5.1
Brief description of filing. (If	Revising base rates, age/gender/marital s multi-car factors, t	introducing tatus, vehicle use, and o replace existing r, introducing vehicle
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	rel which will	
	Grinnell Mutual Reinsur	
	Name of Compa	-
	John Landkamer -	Actuary

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective: March 28, 2010 New / April 22, 2010 Renewal

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Automobile Liability Private Passenger Commercial	36,914,224	11.2%
 Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto 	36,350,938	5.6%
 Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire 		
10. Extended Coverage11. Inland Marine		
12. Homeowners13. Commercial Multi-Peril14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain term	itory (territories) or certain classes?	If so, specify:
	ollows rates of an advisory organization of the control of the con	
introduction of Availabership Di	SCOURT MAXITION.	

Name of Company

Judith M. Feldmeier

Vice President & Chief Actuary, F.C.A.S., M.A.A.A.

^{*} Annualized In-Force Premium

^{**} Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>02/01/2010</u> for <u>PPA</u> new <u>business</u> and <u>03/01/2010</u> for <u>PPA</u> auto renewal <u>business</u> for an overall decrease of 0.9%.

(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
33.13.13.4	7	
Automobile Liability Private		
Passenger Commercial	8,528,290	-0.2%
2. Automobile Physical Damage		
Private Passenger Germercial	3,182,411	-3.2%
3. Liability Other Than Auto		
Burglary and Theft	***************************************	
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		
Line of insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, spec	rify: This filing proposes changes to BI
	and 37 and for CP and CL base r	
31,21,37,38,43,48,49,51,52,and 58.	and 37 and for or and or base i	ales are changes are in territories
31,21,31,36,43,46,49,31,32,and 36.		
Priof description of filing (If filing follows	rates of an advisory organization, specify	organization): This filing changes has
	of 0.9%. The rule changes are changes	
		to predominately to nandle 150s new
symbol assignment for vehicles with mod	ei year 2011 and later.	<u> </u>
*Adjusted to reflect all prior rate changes		
**Change in Company's premium level w	hich will result from application of new rate	S.
	Safew	ay Insurance Company
		Name of Company
	·	
	Denise Farnan -	Consulting Actuary Perr & Knight
		Official Title

	Change in Company's premium or rate	level produced by rate revision effective	June 15, 2010
	(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or -)**
	Coverage	volume (mmois)	Change (+ O1 -)
1.	Automobile Liability		
	Private Passenger	807,323	+19.1%
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	510,266	+6.2%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (ter	ritories) or certain classes? If so, specify:	
No			
		rates of an advisory organization, specify of	organization):
Base Rate changes by coverage based on our indications			
* /	Adjusted to reflect all prior rate changes.	•	
	Change in Company's premium level wh		
	esult from application of new rates.	1744 1744	
	court from application of now lates.		

Selective Insurance Company of the Southeast

Name of Company

Official - Title

ILLINOIS

SUMMARY SHEET (Form RF-3)

Change in Company's premium or rate level produced by rate revision effective		January 11, 2010	
	(A)	(2)	
(1)	(2)	(3)	
•	Estimated	Danasant	
	Annual Premium	Percent	
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>	
1. Automobile Liability			
Private Passenger	\$63,392,246	0.0%	
Commercial	\$1,827,858	2.3%	
2. Automobile Physical Damage			
Private Passenger	\$41,970,018	0.0%	
Commercial	\$1,422,102	7.8%	
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other			
Line of Insurance			
Does filing only apply to certain territory (territorie N/A	es) or certain classes? If so, spe	cify:	
Brief description of filing. (If filing follows rates of Introduced the customer rating index and age based base rates and rating factors. We also made change program and Steer Clear Discount rule.	l rating for motorcycles, includi	ng adjustment of	
* Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	result from application of new	rates.	
	ND CASUALTY COMPANY		
Name o	of Company		

ILLINOIS

SUMMARY SHEET (Form RF-3)

Change in Company's premium or rate level produced by rate revision effective		January 11, 2010	
(1)	(2)	(3)	
	Estimated		
	Annual Premium	Percent	
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**	
1. Automobile Liability			
Private Passenger	\$983,604,382	0.0%	
Commercial	\$29,301,190	-0.6%	
2. Automobile Physical Damage			
Private Passenger	\$715,607,486	0.0%	
Commercial	\$30,271,042	-1.4%	
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners	-		
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other			
Line of Insurance			
Does filing only apply to certain territory (territori N/A	es) or certain classes? If so, spe	cify:	
11/21			
D. C.L CCL. ACCL. C.L.	C 1:	······································	
Brief description of filing. (If filing follows rates			
Introduced the customer rating index and age base			
base rates and rating factors. We also made chang	es to the Employer's Non-Owne	rship Liability	
program and Steer Clear Discount rule.			
		·	
· · · · · · · · · · · · · · · · · · ·			
* Adjusted to reflect all prior rate changes.			
** Change in Company's premium level which wil	I result from application of new	rates	
Change in Company a promium level which wil	result from application of new	raios.	
STATE FARM MUTUAL AUTO	OMOBILE INSURANCE COM of Company	PANY	
Name (or Company		
CTEVE HARD ACTUARY AND A	0010E 13 E 000 = - : - : - :		
STEVE HADD ACTION OF AND A	CCICTANT CECDETADV TDE	ANTIDED	